Fill	in this informa	tion to identify yo	our case:									
Debtor 1 Jacinth M. Brown-Roberts							Check if this is:					
							Α	n amended filing				
	tor 2								wing postpetition chapter			
(Spo	ouse, if filing)						1:	3 expenses as of	the following date:			
United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA								MM / DD / YYYY				
	e number 17	7-17674										
O	fficial Fo	rm 106J										
S	chedule	J: Your	Expen	ses					12/1			
Be info nur	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer eve	s possible. eded, atta ry question	If two married people a ch another sheet to this								
Par 1.	t 1: Descr Is this a joir	ibe Your House	ehold									
١.	No. Go to											
☐ Yes. Does Debtor 2 live in a separate household?												
□No												
	□ Y	es. Debtor 2 mus	st file Officia	al Form 106J-2, Expenses	s for Separate House	hold of De	ebto	r 2.				
2.	Do you have	e dependents?	■ No									
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?			
	Do not state								□ No			
	dependents	names.							□ Yes □ No			
									☐ Yes			
									□ No			
									☐ Yes			
									□ No			
2	De veur evr	anaaa inaluda	_						☐ Yes			
3.	expenses of	enses include f people other t d your depende	han $_{\square}$	No Yes								
Par	t 2: Estim	ate Your Ongoi	na Monthi	v Evnenses								
Est	imate your ex	penses as of y	our bankru	ptcy filing date unless y y is filed. If this is a supp								
				government assistance luded it on Schedule I:								
(Of	ficial Form 10	61.)					_	Your exp	enses			
4.		or home owners and any rent for th		ses for your residence.	nclude first mortgage	e 4.	\$		0.00			
	If not includ	led in line 4:										
	4a. Real e	estate taxes				4a.	\$		280.83			
		rty, homeowner's	s, or renter'	s insurance		4b.			780.00			
			•	pkeep expenses		4c.			250.00			
5.		owner's associat		dominium dues o ur residence , such as ho	me equity loans	4d. 5.			0.00 0.00			
J.	Auditional	igage payiii	citto for yo	ai residence, such as no	nno c quity idalis	٥.	Ψ		0.00			

6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15b. \$ 1		200.00 85.00 250.00 0.00 650.00 0.00 200.00 125.00 50.00 300.00 200.00						
 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 	6b. 9 6c. 9 6d. 9 7. 9 9. 9 10. 9 11. 9 12. 9 14. 9		85.00 250.00 0.00 650.00 0.00 200.00 125.00 50.00 300.00						
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	6b. 9 6c. 9 6d. 9 7. 9 9. 9 10. 9 11. 9 12. 9 14. 9		85.00 250.00 0.00 650.00 0.00 200.00 125.00 50.00 300.00						
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15b. \$ 1		250.00 0.00 650.00 0.00 200.00 125.00 50.00 300.00						
6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	6d. 3 7. 3 8. 3 9. 3 10. 3 11. 3 12. 3 13. 3 14. 3	5	0.00 650.00 0.00 200.00 125.00 50.00 300.00						
Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$	5	650.00 0.00 200.00 125.00 50.00 300.00 200.00						
 Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 	8. 9 9. 9 10. 9 11. 9 12. 9 13. 9 14. 9	5	0.00 200.00 125.00 50.00 300.00 200.00						
 Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. Life insurance 	9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 1	\$ 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	200.00 125.00 50.00 300.00 200.00						
 Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 	10. \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	5	125.00 50.00 300.00 200.00						
 Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 	11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$	\$	50.00 300.00 200.00						
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 	12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$	\$ \$	300.00 200.00						
Do not include car payments. 3. Entertainment, clubs, recreation, newspapers, magazines, and books 4. Charitable contributions and religious donations 5. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	13. \$ 14. \$ 15a. \$ 15b. \$	\$	200.00						
 Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. Life insurance 	13. \$ 14. \$ 15a. \$ 15b. \$	\$	200.00						
 4. Charitable contributions and religious donations 5. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 	14. \$ 15a. \$ 15b. \$	\$							
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 	15a. \$ 15b. \$		0.00						
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	15b. S								
15a. Life insurance	15b. S								
	15b. S	\$	114.00						
IOD. I IODINI IIIOUI AIIO			125.00						
	150 0	·							
	15c. S	·	0.00						
. ,	15d. S		0.00						
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	•							
· · · ·	16. \$	Ď	0.00						
7. Installment or lease payments:	47- (•	2.22						
, ,	17a. S	·	0.00						
	17b. S	·	0.00						
·	17c. S	·	0.00						
	17d. S	\$	0.00						
8. Your payments of alimony, maintenance, and support that you did not report as	40 (•	0.00						
acadetica from year pay on fine of confedence, from from from form form	18. \$								
9. Other payments you make to support others who do not live with you.		\$	0.00						
·	19.								
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I									
	20a. S		0.00						
20b. Real estate taxes 2	20b. S	\$	0.00						
1 7:	20c. S	·	0.00						
20d. Maintenance, repair, and upkeep expenses 2	20d. S	\$	0.00						
20e. Homeowner's association or condominium dues	20e. S	\$	0.00						
1. Other: Specify:	21	+\$	0.00						
2. Calculate your monthly expenses		•	_						
22a. Add lines 4 through 21.		\$	3,609.83						
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$							
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,609.83						
O Calculate varia monthly not income	L								
3. Calculate your monthly net income.		•							
	23a. S		7,000.00						
23b. Copy your monthly expenses from line 22c above.	23b	-\$	3,609.83						
23c. Subtract your monthly expenses from your monthly income.	23c.	\$	3,390.17						
The result is your <i>monthly net income</i> .	23c.	Ψ	3,330.17						
4. Do you expect an increase or degrees in your expenses within the year often you file	thin f	iorm?							
Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of									
modification to the terms of your mortgage?	jugu pa	.,	acc of accidate because of						
■ No.									
Yes. Explain here:									